

**The President.** And I'm—I tell you what I'm—

**Q.** Please give me two minutes with this letter.

**The President.** I'm going to get the photographer to take a picture of you handing me that letter.

**Q.** Thank you, sir.

**The President.** And that way I'll remember who you were when you handed it to me. *[Laughter]*

**Q.** I'll always remember you, Mr. President.

**The President.** Thanks for being a firefighter. God bless, everybody. Thank you.

NOTE: The President spoke at 11:09 a.m. at the Kings Point Clubhouse. In his remarks, he referred to Gov. Jeb Bush of Florida, and his wife, Columba; President Oscar Arias Sanchez of Costa Rica; Prime Minister Junichiro Koizumi of Japan; and Chancellor Angela Merkel of Germany. The Office of the Press Secretary also released a Spanish language transcript of these remarks.

## Remarks Following a Visit to a Fire Station in Sun City Center

May 9, 2006

**The President.** Jeb and I just were briefed by the firefighters here about the dry conditions that are creating hazards for the people—and Kelley, I appreciate your briefing. He was in charge of putting out that fire yesterday that consumed 450 acres. They think it was caused by a spark out of one of the utility lines.

I've always been impressed by those who are willing to get out and fight the fires and save lives and save property. I'm surrounded by people who made a career out of that. And I want to thank them for their dedication to service. I want to thank them for the briefing about the threat we find ourselves in; we've got dry and windy conditions.

The good news for the people of Florida is, they've got people who are willing to serve and willing to put their lives at risk and willing to fight fires. There's one going on right now, as we speak. Kelley was briefing us on the equipment and manpower that's in place fighting the fire. This is one of these difficult

periods for the State of Florida, dealing with the traumatic conditions as they are.

Obviously, the people need to be real careful—be careful about starting a fire, be careful about throwing used cigarettes out, and be mindful these are dangerous conditions. And they ought to be thoughtful about how to conduct their lives so they don't put others in the positions where a fire could destroy them or their property.

Do you want to say something, Jeb?

**Governor Jeb Bush.** Well, other than the fact, as the President said, it's actually right that if someone throws a cigarette out on the Interstate, it could create—first of all, it's a loss of life and property and puts a lot of people at risk. And it's a felony in our State. So we want to make sure that no fires are started because of human error or negligence or malfeasance.

**The President.** Anyway, I want to thank you all for joining me.

NOTE: The President spoke at 1:59 p.m. at Sun City Center Fire Station No. 28. In his remarks, he referred to Vincent Kelley, captain, Hillsborough County Fire Rescue. A tape was not available for verification of the content of these remarks.

## Remarks in a Discussion on the Medicare Prescription Drug Benefit in Orlando, Florida

May 10, 2006

**The President.** Please be seated. Thank you. Thanks for letting me come by to say hello. I'm thrilled to be back in the State of Florida. Yesterday I checked in with my brother—*[laughter]*—to make sure everything is going all right. I'm real proud of Jeb. He's a good, decent man, and I love him dearly.

I also checked in with Laura this morning, to see how she's doing. She sends her best to all of you all. She's doing just great, by the way.

I'm here to talk about Medicare. We've got an exciting program and an exciting opportunity for people to improve their lives. So this is an educational forum. This is a chance not only to speak to the folks here but to those who may be watching on TV

about a really interesting opportunity for the seniors all around our country to really improve their lives by signing up for a new opportunity in Medicare.

But before I do—and by the way, I’ve got some interesting helpers here to make the case. I thought it would be better to have others describe what the Medicare program means—than me sitting up here just giving a long speech. *[Laughter]* You probably agree with that, but you’re too polite to say so. *[Laughter]*

I want to thank Tommy Martinez for welcoming us here. Tommy, thank you. I thank all the good folks who work here. Thanks for helping our seniors to improve their lives. You know, one of the great things about America is, there’s a lot of citizens who have heard a call to help a neighbor, and there’s a lot of people that are willing to, kind of, help educate somebody or help somebody find help. That’s what we’re really here to honor today, in many ways. We’re not only here to talk about a new program for Medicare, but we’re here to thank people that have taken time out of their lives to help a senior improve their lives.

I want to thank Sylvia Caceres. She is the central Florida regional director. Thank you, Sylvia. Ramon Ojeda is the president of the Hispanic Chamber of Metro Orlando. Ramon, thank you. Finally, old Rich Crotty, he’s here somewhere. Hey, Rich, good to see you, buddy. I was thinking about Rich. You might remember, his son made him famous—*[laughter]*—made me famous too. *[Laughter]* The lad went to sleep in the middle of one of my stemwinders. *[Laughter]* Give him my best, Crotty.

Let me talk real quick about Medicare. First of all, my administration views Medicare as a vital—that Medicare is a vital program. It’s an important program that has worked well for many years. And therefore, when I got into office, I said, we’re going to not only commit ourselves to Medicare, but we’re going to make it better. See, the Federal Government has said to our seniors, “We’re going to provide a good health care system for you.” And so we started looking at whether or not the Medicare system was delivering as good a health care system as

possible. And I determined it wasn’t. I said it was good, but it could be better.

And the reason why it wasn’t as good as it could be is because the system was not helping seniors with prescription drugs. In other words, medicine had changed a lot since the ’60s, obviously—that’s an obvious statement—but Medicare itself hasn’t changed along with the modernization of medicine. I’ll give you a good example. Medicare would pay for ulcer surgery, a surgery which might cost upwards of \$25,000, but it would not pay for the prescription drugs that could have prevented the ulcer from happening in the first place. And that didn’t make any sense. It didn’t make any sense for our seniors, and it didn’t make any sense for the taxpayers. And so it seemed like, it made sense to me to modernize the system, which we did.

And so we created what’s called Part D, and basically Part D is a prescription drug benefit for not only our seniors but those who qualified who are disabled as well. Part D says this: It says that seniors have now got a prescription drug plan available to them. It’s your choice to make. One of the interesting things about the strategy we’ve employed is, seniors now have over 40 choices to choose from in Florida. Now, that in itself created a slight problem, because 40 choices can create a sense of uncertainty among people. You know, people say, “I don’t think I want all those choices.” After all, there had been very little choice up to now. And so the idea of saying, “Well, here are 40 different plans to choose from,” I knew was going to create the need to encourage people to get involved to help people make the right choice for them.

I strongly believe that giving seniors choices is important to a good health care system. After all, not everybody’s needs are the same. And therefore, the more opportunity there is to pick a program that meets your needs, the better off the health care system will be. That’s why choice matters.

It also means there are people actually competing for your business. They’re saying, “I want your business; therefore, I’m going to try to make it attractive for you.” And the idea of giving choice to people has affected the cost of the plan. When we first got in

there, we anticipated the cost for the average senior was going to be \$37 a month; now it's down to \$25 a month for the average plan. That's positive news. It's positive for our seniors, and it's positive for the taxpayers.

We also believe that peace of mind is important for our seniors. And so inherent in this reform plan is the notion of the Government stepping in after a certain level of expenditures have been made by the average senior. In other words, anything over \$3,600 in prescription drug coverage, the Government will pick up 95 percent of it. That's a catastrophic plan. It says that we recognize that we've got to help seniors after a certain level of expenditures, so as to help peace of mind.

That wasn't the case in the old plan, as you might remember. The new plan has got stop-loss; it's got catastrophic care. And that's a very important part of helping make sure the system was modern. The other thing that's important for people to understand is that this program is very generous for low-income seniors. About a third of the seniors qualify for extra help. And that's the way it should be in America, in my judgment. We want to help people who cannot help themselves. And so if you're a low-income senior, this plan will pay nearly 95 percent of all your drug costs, and that's important for our seniors to understand.

We've had good success at signing people up. There's about 42—a little more than 42 million people who are eligible for Medicare in the United States. Up to this point, a little over 31 million have signed up for the new Part D plan. There's about 6 million seniors who don't feel the need to sign up because they're adequately covered elsewhere, and that's okay; I understand that. So there's about 37, more or less, million people have so far signed up since January for this new benefit. And our mission is to reach out for the final 6-plus million, is to encourage people to, at the minimum, take a look at what's available.

There is a May 15th deadline, unless you're a low-income senior, in which case you can sign up after May 15th without any penalty. And that's important for our seniors to understand as well.

And so we're here today to talk about a Medicare plan that I believe is a good deal for America's seniors. It's very important for people to understand that there are significant savings for you involved in this plan. There's—the average senior saves about one-half on his or her drug bills, and that's good news. This is a plan that helps people when there's a catastrophe in their lives, and this is a plan that means our low-income folks won't have to choose between food and medicine. And that's good for America.

Now, we're reaching out to people from all walks of life. First of all, if you're interested in finding out about the program, call 1-800-MEDICARE, and somebody will be there at the other end of the line explaining it to you. If you're computer literate, call up medicare.gov, and you'll find a program that will help you—it will help explain to you what is available for you.

If you've got a—if you're a son or a daughter, and you've got a mother or dad who is eligible for Medicare and hasn't looked at this program, you have a duty, in my judgment, to be a good son or a daughter and help your mom or dad. You know, some of our seniors aren't that comfortable with using a computer, and I understand that. But your sons and daughters are comfortable, or your grandchildren are comfortable. Get them to help you. Get them to take a look at what's available. A son or a daughter owes it to their mom and dad to do that. If you're a member of a church group and you've got seniors in your congregation, find help for them. If you're a member of AARP, an active member of AARP, help a friend see what's available. If you're a part of an outreach group such as this, continue doing your duty to give people knowledge.

And that's what we're here to do. We're working with the National Alliance for Hispanic Health, the Hispanic Business Roundtable, the National Coalition of Latino Clergy and Christian Leaders. I mean, we're talking to a lot of groups. We've reached out through Univision and Telemundo and Spanish radio. My point is, is that we're reaching out to all people in all societies. We're working with the NAACP, AARP. There are a lot of people trying to help. And for those of you here who are helping, thank you for doing what you're

doing. I hope it makes you feel better. It makes me feel good to know there are millions of Americans who are willing to help a neighbor understand what's available in this important program.

So you're watching the President be educator in chief today. *[Laughter]* My job is to go around America and explain that which is available, but I can't do it alone. Yesterday, down in South Florida, Mike Leavitt was with me. He's the Secretary of Health and Human Services. He's doing a fine job. Josefina Carbonell works with Mike. Her title is Assistant Secretary for Aging, Administration on Aging, Department of Health and Human Services—a long title for a fine person. Josefina, tell us what's happening in the Department. Welcome.

**Assistant Secretary Josefina Carbonell.** Thank you, Mr. President. Yes, I'm known as the Assistant Secretary of Aging, but I've got the great honor to also have been coined in this campaign as "Senora Medicare." *[Laughter]* And we've gone across the country.

It's indeed a wonderful honor to serve you as the Assistant Secretary for Aging, but having worked in the aging field for over 35 years right here in the State of Florida, it is so gratifying and so historic for me personally to see the fine work of individuals and volunteers across this country that have made such a difference. And you'll meet—some of them are with us today, and many in the audience—how important the benefits are.

We've held over 47,000 events like this, assistance and enrollment events and information events. And we've ridden in buses, in our Medicare buses across this country and visited with people in towns small and big, rural and urban communities, in limited English-speaking communities. And we are so proud of the work that our inner-city and our community-based organizations and our volunteers in both the private non-profit sector, civic organizations, the business community, and our municipalities, and most importantly, our volunteers.

We've had a wonderful opportunity to have over 40,000 dedicated volunteers that have served to assist people on one-on-one as a backup to our 1-800-MEDICARE, to, of course, our web site, and our area agencies

on aging, our senior centers, our Meals on Wheels programs, our home care agencies. But those 40,000 volunteers have made such a difference. I've been in communities where we've sat around somebody's dining room table in the middle of a little church hall—and being able to assist them one-on-one making that choice.

And that's so important. I know that having worked with seniors for so many years, it is so gratifying to see the difference that this new benefit takes on, not only in cost savings, but the most important thing for me, in many of the minority communities, have been the ability for them to access new preventive benefits, and cardiovascular and diabetes and other chronic conditions that are so prevalent in our minority communities. So that's another very important feature.

But help is there. Those that might still be afraid and have not set out—the 1-800-MEDICARE, we've staffed that Medicare line up with 6,000 operators, trained people. We've got volunteers like Sandra, 40,000 across this country, and the area agencies on aging and the elder help lines that are there to assist you. We also have help lines for minority communities. We know that in the Hispanic community, in addition to the 1-800-MEDICARE, we have the 1-800-SU-FAMILIA [1-866-SU-FAMILIA]\*, run by the National Hispanic Council, the National Hispanic Alliance for Health, which is manned by grassroots organizations across this country, and many, many more that are there to help you.

So seek help. The 15th is the deadline. Don't stay without that very important benefit, that not only will give you the prescription drug benefits that you need but, most importantly, will be a lifesaving effort for many, many of our at-risk individuals.

**The President.** Yes, I knew one of the real challenges, once this bill had passed, was to convince people that change would be in their interests. There's a lot of folks, frankly, at a certain point in their lives, where they're just really aren't interested in change. They're happy with the way things are, and therefore, it would be hard to get people to, kind of, be alert to the new opportunities.

\* White House correction.

And so therefore, we knew we'd have to rally a group of folks who were not political people, but just concerned about their neighbor, so that there was a human touch to convince somebody that change—it's one thing to call a phone number; you're talking to somebody you can't see. But the most important contact is the one-on-one contact that many in this audience have helped others with. And for those of you doing that, I want to thank you.

Josefina also talked about an important part of the reform, and that is that there's now a wellness exam for people entering Medicare finally. It makes sense to detect problems early so it makes it easier to solve problems. That old Medicare system didn't have, kind of, this sense of prevention as a part of our strategy to help our seniors, and now it does.

But for a senior who hasn't signed up, call but also reach out to somebody. They'll help you. This program is not as complicated as one would initially think. And there's a lot of people that will help you, help you walk through the steps necessary to determine what is best for you.

Now, we've got some folks here who are being served. Pete, Pete Navarro, welcome; thank you for coming.

**Peter Navarro.** Good morning, Mr. President.

**The President.** You got to speak into the mike.

**Mr. Navarro.** Good morning, Mr. President.

**The President.** Where do you live?

**Mr. Navarro.** I live in Tavares, Florida.

**The President.** Very good—right around the corner.

**Mr. Navarro.** About 45 minutes.

**The President.** Well, it's a large corner. [Laughter] Give people your circumstances, please.

[At this point, Mr. Navarro, retiree, made brief remarks.]

**The President.** One of the things people have got to understand—Pete, by the way, is not eligible for Medicare yet, just in terms of age.

**Mr. Navarro.** That's correct.

**The President.** You're 59?

**Mr. Navarro.** Fifty-nine, yes.

**The President.** So am I. [Laughter] I blame my gray hair on my mother. [Laughter] I don't know who you blame yours on. [Laughter] I used to think 60 was old, didn't you?

**Mr. Navarro.** When I was young, I thought that was way out.

**The President.** Now I think it's young, don't you?

**Mr. Navarro.** I think so. [Laughter]

**The President.** Yes. Anyway, people on disability can apply for this program as well. You have done so.

**Mr. Navarro.** I have done so.

**The President.** You're taking eight different medications a day.

**Mr. Navarro.** Eight different medications a day.

**The President.** So you're worried, obviously, about the cost.

**Mr. Navarro.** I was, and since I have it, I only pay a \$2 copay for generics and a \$5 copay for the regular drugs.

**The President.** Right. Are you able to estimate your monthly savings now?

**Mr. Navarro.** I'm saving between 500 and 600 dollars a month.

**The President.** I'm not surprised. We hear stories like this all the time, where this program is helping people. The average senior is going to save half on their drug bills. Here's a fellow who is saving a lot more than half.

**Mr. Navarro.** That's a lot of money.

**The President.** Yes. And that helps you, obviously—500 or 600 dollars a month gives you a little breathing room.

**Mr. Navarro.** Oh, yes. It really does. It eliminates that stress that you live when you don't know if you can get it or not.

**The President.** Yes. Well, I appreciate you sharing your story with us. It's—so, when are you turning 60?

**Mr. Navarro.** Next January.

**The President.** Oh, January. You're a lot younger than I am. [Laughter] We're baby boomers—[laughter]—which really leads to another issue, and that is whether or not the Congress will have the will to help restructure Social Security and Medicare so a young generation, your grandchildren who are going to be paying people like me to retire—whether or not the system is solvent for

them. You're fine. I mean, the seniors are in great shape when it comes to Medicare and Social Security. The truth of the matter is baby boomers like old Pete and I here, we're in good shape. It's just those who are going to be paying for us need to make sure the system is solvent.

It's not exactly the issue, but it is an issue that is of major importance. And, look, I'll work with Congress. Look, we need to just get rid of all the politics in Washington and focus on what's best for the country and do what's right.

All right, Pete, thank you very much.

Gloria Lavergne. Gloria, where do you live?

**Gloria S. Lavergne.** Good morning, Mr. President.

**The President.** Yes ma'am, thank you.

**Ms. Lavergne.** I live here in Orlando.

**The President.** Fantastic.

**Ms. Lavergne.** I was born and raised in Puerto Rico.

**The President.** *Que bueno.*

**Ms. Lavergne.** *Que bueno.* And I moved to Florida in 1982 with my family. I work as a legal assistant for 20 years, and unfortunately, on 2002, I became disabled. And like you, I suffer from that time until 2 months that I'm going to be able to get my supplemental, because I'm paying right now \$265 with an insurance. And I would say, when I heard about Medicare Part D, I start my own search. I look at different companies that I receive in the mail and compare, start calling. Don't be afraid to call; get the name of the medication that you are taking—I'm taking six medicines every day. One of them is Lidoderm—it's a patch—that cost me at regular price \$175 per month, and I'm paying \$28 is my deductible.

**The President.** Let's slow down for a minute. You're doing great. I just want to make sure everybody understands: This good woman is paying for six different medicines, one of which costs 175—speak in the mike, please—175. You signed up for Medicare Part D, and now it costs you 28?

**Ms. Lavergne.** My premium is \$26.60; my deductibles are \$28; and I'm saving \$550 per month. That's amazing.

**The President.** Yes. Now, I know it sounds too good to be true; like, if I had

said it, everybody would have said, "Well, I think he's just—you know—just talking." [Laughter] So I asked Gloria to be here. It's interesting what she said. She said she took the initiative to see what was available.

Was it that difficult?

**Ms. Lavergne.** No, it wasn't difficult. I look at the brochures, check with the medication that I was taking, and I enrolled in AARP—for me is one of the best. And I'm very happy. I encourage everybody to join the program.

**The President.** See, she said—what you just heard her say is, she took the initiative, took a look, and found a program that met her needs. And that's why choice is important. In other words, the Government didn't say, "Here's the program that meets your needs." The Government said, "Here's programs available. You pick the one that meets your needs." It's a little change of attitude, when you think about it—basically empowers the customers.

Now, there are some people, I readily concede, that aren't that confident about picking a program that meets their needs. But there are people out there who are willing to help you. So therefore, please call in and let us know who you are. We're trying to make sure that every senior has a chance to sign up for this program. And there's going to be some people in society that are nervous about the program. They hear all the talk, and they hear this program, and they hear the advertisements, and I know they're nervous. I know they're concerned. But I assure you, it is worth your time to listen to somebody who wants to at least explain what's available for you.

If you're—I repeat, if you're a son or a daughter and your mom hasn't signed up or your dad hasn't signed up, do your duty and—to find out what's available and explain. You just heard the testimony of Gloria; she's saving \$500 a month.

**Ms. Lavergne.** —\$550.

**The President.** —\$550 a month. Well, that's a lot. And one of the things we want is the program to work, and it works well when people take advantage of the program.

So thank you both for sharing your—you got something else to say? You're welcome—you're through?

**Ms. Lavergne.** Thank you so much.

**The President.** *Gracias.* Good job. Very good job. I told you you'd do a good job. You were great.

We got an interesting fellow here named Ramon Ortiz. Ramon is a pharmacist, as you can see. One of the most important groups of people who are helping our seniors realize what is available are our pharmacists. You can understand why. They're the point of contact for a lot of our seniors.

How long have you been a pharmacist?

**Ramon Ortiz.** Well, 15 years. I've been 15 years—3 years which I served in the United States Air Force. I was stationed here at Patrick Air Force Base.

[Mr. Ortiz, pharmacist, CVS Pharmacy, made brief remarks.]

**The President.** One of the things he said that's interesting is—CVS took corporate responsibility and said, we now understand—once President George W. signed the bill, we understand that a lot of our customers are now going to be wondering whether or not it makes sense for them to look at it. And the company became a part of the educational outreach by educating first the educators, who happened to be the pharmacists; that's what you're saying.

And then now—so you've got people coming, and saying, hey, Ramon, what's up? Maybe they don't put it that way—[laughter]—but they're—

**Mr. Ortiz.** We knew it was going to be big. And also, we knew that we were going to be providers; we were going to be instrumental in their choices.

[Mr. Ortiz made further remarks.]

**The President.** It's hard for some Americans to believe, but there were seniors who were going out—without their drugs in the past. People had to choose, and that's not right. And this program really helps a lot of low-income seniors. It helps all low-income seniors. We don't want people making that choice between food and medicine. We want the health care system to be modern; we want it to work. If you're going to say to your seniors, "Let's have a good health care system," we need to make it good, and we've

done that. And so—keep going; you're on a roll. [Laughter] Your mother?

**Mr. Ortiz.** I also—perhaps one of the most difficult patients that I had was my mom.

**The President.** Yes, I know the feeling. Does she tell you what to do?

**Mr. Ortiz.** Yes. For her, I'm the baby; I'm not a pharmacist.

**The President.** Yes, well, I know the feeling as well. Join the "aggressive mothers club." [Laughter]

**Mr. Ortiz.** So being a pharmacist, seeing how much this program had helped seniors, and I knew, because I was paying for my mom's prescriptions sometimes, and I knew that she was taking—paying over \$280 for prescriptions. Recently I called her, yesterday. She told me that she was not even taking some of the medications doctor prescribed because she could not afford it. I said, "Mom, why didn't you call me? I would have paid for your prescriptions."

Finally, I convince her—she's down in Puerto Rico in a small town, Ceiba; she enrolled. And she asked me, tell President Bush—[laughter]—this is the greatest thing ever happened. Now my father, at the age of 73, he's looking for retirement. He was working 40 hours just to pay—

**The President.** To help your mom.

**Mr. Ortiz.** —for the prescriptions. Now he can look into retirement. I'm not sure if my mom will allow him to retire. [Laughter] They cannot be in the same house. [Laughter] True story.

**The President.** Let's leave it at that, you know? [Laughter]

**Mr. Ortiz.** So I mean, I know there's a lot of complication, and I asked Anna, the first lady that I told you, "Anna, do you really need to understand the Medicare Plan D?" She said, "No, I don't have to; I'm saving money." [Laughter] That's what it's all about.

**The President.** Yes, it is. You know what I come away with? One, I want to thank you for your compassion. There's a lot of people who deeply care—a lot of people who care about our fellow citizens. We really are a compassionate country, aren't we? Here's Ramon. You know, he speaks with passion

about people who come to his place of business worried about their health care and worried about their future. Thanks.

The other good lesson is, here's a good son. You know, he takes time to worry about his mom—and dad, by the way. Sons and daughters owe that to their parents. They have received a lifetime of love from a mother or father, and they need to repay it by helping understand what's available in this new program. So if you're—I keep saying this, I know, but I strongly believe it. I believe there's personal responsibility in society, and sons and daughters have a personal responsibility to help their mom or dad, just like Ramon did.

You did a fine job. Thank you. *Gracias.*  
**Mr. Ortiz.** *Gracias.*

**The President.** Sandra Johnson. Now, Sandra Johnson works for the Serving Health Insurance Needs of Elders, known as SHINE. Is that right? Explain SHINE.

[Sandra Johnson, local coordinator, Serving Health Insurance Needs of Elders, made brief remarks.]

**The President.** You know what's a blessing? We got people like you in this country, like Sandra. She comes down here, she says, "What can I do to help. How can I help somebody?"

I love your spirit. Thanks for helping. She represents a lot of other people in this area and around the country who are volunteering.

**Ms. Bryan.** [Inaudible]—\$22 a month.

**The President.** There you go. [Laughter]  
From 350 to 22?

**Ms. Bryan.** Twenty-two.

**The President.** Testify. [Laughter]

**Ms. Bryan.** [Inaudible]

**The President.** There you go. We're glad you're here, Ms. Bryan. Thank you for coming.

Listen, I hope you've enjoyed this experience. I've asked these good folks to join us to help make the case: One, take a look at what's available; two, help somebody take a look at what's available. That's all we can ask. There's a May 15th deadline coming up, unless you qualify for extra help, in which case you can sign up after May 15th with no penalty. If you don't qualify for extra help, sign

up now. Now's the time. This is a good deal. It's the Government doing its duty to provide modern medicine for our seniors.

I want to thank our panelists. You all did a fantastic job. God bless you all, and God bless our country.

NOTE: The President spoke at 9:47 a.m. in the Asociacion Borinquena de Florida Central, Inc. In his remarks, he referred to Gov. Jeb Bush of Florida; Tommy Martinez, president, Asociacion Borinquena de Florida Central, Inc.; Sylvia Caceres, southern States regional director, the Puerto Rico Federal Affairs Administration; and Mayor Richard T. Crotty of Orange County, FL, and his son Tyler.

## Remarks Following a Meeting With Victims of Identity Theft

May 10, 2006

Identity theft is a serious problem in America. I have just listened to the horror stories from fellow citizens who have had their identities stolen. I listened to their ideas about how the Federal Government can help in the response in not only dealing with those who commit the crime but helping those who have been victimized. And I want to thank you all for joining us. Thanks a lot.

I appreciate Al Gonzales and Chairman Majoras, Deb Majoras, of the FTC for being here, because I just signed an Executive order that has the Attorney General as the Chairman, the Chairman of the FTC as the Vice-Chairman of a coordinating group to make sure that this Government of ours uses our assets in a responsible way, in a good way, to not only put those people who commit identity fraud in jail but to help the victims of identity fraud.

I've signed two pieces of legislation which are important, one of which says that credit companies must issue a credit report once a year free of charge. We're very serious about upholding the law in this administration, and credit companies must look at the spirit and the letter of that law, so that when citizens ask for the free credit report on an annual basis, he or she should be given that free credit report.

I signed law enhancing penalties. Now what we're going to do is make sure that the